## PART B - FEE(S) TRANSMITTAL

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(Denositor's name) (Signature) (Date)

Kelly, P.A.

FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO APPLICATION NO. FILING DATE W51 12-0033 8471 10/589.542 04/17/2008 Nicolas Ibrahim TITLE OF INVENTION: CELLULAR RADIOTELEPHONE SIGNAL PERMITTING SYNCHRONIZATION OF A SUPPLEMENTARY CHANNEL BY

PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE APPLN, TYPE SMALL ENTITY ICCUR FEE DUE \$1740 \$300 \$2040 03/09/2012 NO nonprovisional

EXAMINER ARTURIT CLASS-SUBCLASS  SHEN, QUN 2617 370-350000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address for Change of Correspondence Address for Change of September 10.58 (12.2) attached.  2. Westman. Change of Correspondence Address for Change of						
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address or indication of "Fee Address" (37 Logistics of CFR 1.363).  Change of correspondence address or indication of "Fee Address" (37 Logistics of CFR 1.363).  2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys of agents OR, attentivatively, or agents OR, attentivatively, or agents OR, attentivatively, or agents OR, attentivatively, or agent OR, attenti		EXAMINER	ART UNIT	CLASS-SUBCLASS		
CFR 1.563).  Change of correspondence address (or Change of Correspondence or agents OR, alternatively,		SHEN, QUN	2617	370-350000	,	
	CFR 1.363).  Change of correspondence address (or Change of Correspondence		(1) the names of up to	3 registered patent attorneys	David D. Brus	

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

MEANS OF A PRINCIPAL CHANNEL AND CORRESPONDING METHOD, TERMINAL AND BASE STATION

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Wavecom Issy-Les-Moulineaux, France

Please check the appropriate assignce category or categories (will not be printed on the patent): 🗆 Individual 🕱 Corporation or other private group entity 🗀 Government

4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee
Dublication Fee (No small entity discount permitted) A check is enclosed.

A Payment by credit card. Form PTO 2038 is attached.

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 231123 (enclose an extra copy of this form).

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□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature David D. Brush Registration No. 34,557 Typed or printed name

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complice, including gathering, preparing, and that the confidence of the complete of the co

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